

## SSO & TRAINTRAQ ACCESS APPLICATION

I understand that all information concerning employees' identity which may come to my knowledge while using any of the applications defined on this form, is to be held in the strictest confidence and may not be disclosed except as provided in policy and procedures pertaining to performance of my job duties and assignments.

By logging on to this computer systems below, I acknowledge my responsibility for strictly adhering to university policy and state and federal law. I also am aware that penalties exist for unauthorized access, unauthorized use, or unauthorized distribution of information contained in or accessed from these applications.

In addition, I understand that computer system password(s) I receive or devise is (are) confidential. I will not disclose to any unauthorized person the password(s) which I am given or devise and I will not write down such password(s) or post them where they may be viewed by unauthorized people. I understand that I am responsible for any computer transactions performed as a result of access authorized by use of my password(s). I agree further NOT to attempt to circumvent the computer security system by using or attempting to use any transaction, software, files or resources I am not authorized to use. I understand that use of a password not issued specifically to me is expressly prohibited.

I also understand that failure to observe these restrictions constitutes a "Breach of Computer Security" as defined in the TEXAS PENAL CODE, CHAPTER 33, and that such an offense will subject me to university or agency disciplinary action and criminal prosecution to the full extent of the law.

For UIN Manager Access Only: Please complete the TAMUS System Enterprise Applications Statement of Responsibility Form at [http://assets.system.tamus.edu/SEASupport/tamus\\_sor.pdf](http://assets.system.tamus.edu/SEASupport/tamus_sor.pdf).

\_\_\_\_\_  
Employee Name (print clearly)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Unit/Department

\_\_\_\_\_  
Employee UIN

\_\_\_\_\_  
Employee Title

\_\_\_\_\_  
Phone Number

Access Requested: please denote with a checkmark (✓)	Grant Access (specify type)		Delete Access	For Security Officer ONLY. Signature / Date
	Update	Read Only		
Single Sign-On (SSO) Department Administrator				
TrainTraq Department Processor				

For ADLOC(s): \_\_\_\_\_

Unit Head Approval required if assigning access (or designee if deleting access): \_\_\_\_\_ Date: \_\_\_\_\_